

ISSUE SLIP FILL IN AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
DETERMINATION	<i>sm</i>		06/15/01
COMPLET CLASSIFIER		73	6/23/01
FORMALTY REVIEW	YG	956	08/16/01
RESPONSE FORMALTY REVIEW			

INDEX OF CLAIMS

\_\_\_\_\_ Rejected      H \_\_\_\_\_ Non-elected  
 \_\_\_\_\_ Allowed      I \_\_\_\_\_ Interference  
 (Through numeral) \_\_\_\_\_ Canceled      A \_\_\_\_\_ Appeal  
 \_\_\_\_\_ Restricted      O \_\_\_\_\_ Objected

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Best Available Copy

754 900  
08/16/01

If more than 150 claims or 10 actions  
 staple additional sheet here.

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